

**CT-12****For Oregon Charities****Charitable Activities Section  
Oregon Department of Justice**

1515 SW 5th Avenue, Suite 410  
 Portland, OR 97201-5451  
 E-Mail: charitable.activities@doj.state.or.us  
 Web site: http://www.doj.state.or.us

VOICE (971) 673-1880  
 TTY (800) 735-2900  
 FAX (971) 673-1882

For Accounting Periods Beginning in:

**2010****Section I. General Information**

1. Cross Through Incorrect Items and Correct Here:  
 (See instructions for change of name or accounting period.)

Registration #: 222163-94

Organization Name: Vietnamese Science & Cultural Society of Oregon

Address: 4160 NW 152nd Terr

City, State, Zip: Portland, OR 97229

Phone: 503-997-2260 Fax: Amended Report?

Email: info@vscso.org

Period Beginning: 1 / 1 / 2010 Period Ending: 12 / 31 / 2010

2. Did a certified public accountant audit your financial records? - If yes, attach a copy of the auditor's report, financial statements, accompanying notes, schedules, or other documents supplementing the report or financial statements.  Yes  No
3. Is the organization a party to a contract involving person-to-person, advertising, vending machine or telephone fund-raising in Oregon?  
 If yes, write the name of the fund-raising firm(s) who conducts the campaign(s): \_\_\_\_\_  Yes  No
4. Has the organization or any of its officers, directors, trustees, or key employees ever signed a voluntary agreement with any government agency, such as a state attorney general, or secretary of state, or local district attorney, or been a party to legal action in any court regarding charitable solicitation, administration, management, or fiduciary practices? If yes, attach explanation of each such agreement or action. See instructions.  Yes  No
5. During this reporting period, did the organization amend its articles of incorporation, bylaws, or trust documents, OR did the organization receive a determination letter from the Internal Revenue Service indicating a new or amended tax-exempt status? If yes, attach a copy of the amended document or letter.  Yes  No
6. Is the organization ceasing operations and is this the final report? (If yes, see instructions on how to close your registration.)  Yes  No
7. Provide contact information for the person responsible for retaining the organization's records.

Name	Position	Phone	Mailing Address & Email Address
Tuong Nguyen	Secretary	503-617-7335	466 NW 166th Ave Portland, OR 97229

8. List of Officers, Directors, Trustees and Key Employees – List each person who held one of these positions at any time during the year even if they did not receive compensation. Attach additional sheets if necessary. If an attached IRS form includes substantially the same compensation information, the phrase "See IRS Form" may be entered in lieu of completing that section. (Oregon law requires a minimum of three directors.)

(A) Name, mailing address, daytime phone number and email address		(B) Title & average weekly hours devoted to position	(C) Compensation (enter \$0 if position unpaid)
Name:	<u>Chi Jones 4160 NW 152nd Terr Portland, OR 97229 503-997-2260</u>	President 8 hrs/week	\$0.00
Address:	_____		
Phone:	(____) _____		
Email:	_____		
Name:	<u>Tuong Nguyen 4669 NW 166th Ave Portland, OR 97229 503-617-7335</u>	Secretary 8 hrs/week	\$0.00
Address:	_____		
Phone:	(____) _____		
Email:	_____		
Name:	<u>Tri Than 17786 NW Reindeer Drive Portland, OR 97229 503-614-8472</u>	VP 8 hrs/week	\$0.00
Address:	_____		
Phone:	(____) _____		
Email:	_____		

**Form Continued on Reverse Side**

